

Fill in this information to identify your case:

United States Bankruptcy Court for the:

MIDDLE DISTRICT OF FLORIDA

Case number *(if known)*

Chapter

11☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Gutter Cap of Florida, Inc.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and *doing business as* names

3. Debtor's federal Employer Identification Number (EIN) 47-3788695

4. Debtor's address

Principal place of business

11251 Business Park Blvd., Ste. 9
Jacksonville, FL 32256

Number, Street, City, State & ZIP Code

Duval

County

Mailing address, if different from principal place of business

3810 Williamsburg Park Blvd., Ste. 4
Jacksonville, FL 32257

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) _____

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

☐ Partnership (excluding LLP)

☐ Other. Specify: _____

Debtor **Gutter Cap of Florida, Inc.**
Name

Case number (if known)

7. Describe debtor's business**A. Check one:**

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?**Check one:**

- ☐ Chapter 7
- ☐ Chapter 9

☒ Chapter 11. **Check all that apply:**

- ☒ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☒ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

| | | | | | |
|----------|-------|------|-------|-------------|-------|
| District | _____ | When | _____ | Case number | _____ |
| District | _____ | When | _____ | Case number | _____ |

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

| | | | |
|----------|-------|-----------------------|-------|
| Debtor | _____ | Relationship | _____ |
| District | _____ | When | _____ |
| | | Case number, if known | _____ |

Debtor **Gutter Cap of Florida, Inc.**
Name

Case number (if known)

11. Why is the case filed in this district?*Check all that apply:*

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (*Check all that apply.*)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds***Check one:*

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☒ \$100,001 - \$500,000☐ \$500,001 - \$1 million☐ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Gutter Cap of Florida, Inc.**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **November 7, 2018**
MM / DD / YYYY**X /s/ William Barton Crews**

Signature of authorized representative of debtor

William Barton Crews

Printed name

Title **President****18. Signature of attorney****X /s/ Jason A. Burgess**

Signature of attorney for debtor

Date **November 7, 2018**

MM / DD / YYYY

Jason A. Burgess 40757

Printed name

The Law Offices of Jason A. Burgess, LLC

Firm name

**1855 Mayport Road
Atlantic Beach, FL 32233**

Number, Street, City, State & ZIP Code

Contact phone **(904) 372-4791**Email address **jason@jasonaburgess.com****40757 FL**

Bar number and State

Fill in this information to identify the case:Debtor name Gutter Cap of Florida, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on November 7, 2018**X /s/ William Barton Crews**

Signature of individual signing on behalf of debtor

William Barton Crews

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:Debtor name **Gutter Cap of Florida, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**

Case number (if known): _____

☐ Check if this is an
amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, and government contracts) | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| ADP 7380 Red Road Ste. 202 Miami, FL 33143 | | Payroll Service | Disputed | | | \$3,206.52 |
| American Express 6985 Union Park Center Midvale, UT 84047 | | Credit Card | | | | \$28,975.63 |
| American Honda Finance 20800 Madrona Avenue Torrance, CA 90503 | | 2015 Honda CRV | | \$11,078.60 | \$10,000.00 | \$1,078.60 |
| Chase Bank USA 201 North Walnut Street Wilmington, DE 19801 | | Credit Card | | | | \$14,475.70 |
| Internal Revenue Service 400 West Bay Street Jacksonville, FL 32202 | | Payroll Tax Liabilities | | | | \$48,547.86 |
| Lansing Building Products P.O. Box 6649 Richmond, VA 23230 | | Vendor | Disputed | | | \$28,361.00 |
| Money Pages of Florida, Inc. 7892 Baymeadows Way Jacksonville, FL 32256 | | Advertising | Disputed | | | \$8,630.00 |

Debtor **Gutter Cap of Florida, Inc.**
Name

Case number (if known)

| Name of creditor and complete mailing address, including zip code | Name, telephone number and email address of creditor contact | Nature of claim (for example, trade debts, bank loans, professional services, | Indicate if claim is contingent, unliquidated, or disputed | Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim. | | |
|---|--|---|--|--|---|-----------------|
| | | | | Total claim, if partially secured | Deduction for value of collateral or setoff | Unsecured claim |
| On Deck Capital, Inc. 1400 Broadway, 25th Floor New York, NY 10018 | | Business Loan | Disputed | | | \$122,145.06 |
| Protection One 6820 Southpoint Parkway Ste. 3 Jacksonville, FL 32216 | | Former Security | Disputed | | | \$515.96 |
| Suntrust Bank 303 Peachtree St. Ne Atlanta, GA 30308 | | Various Assets of the Debtor | | \$288,775.61 | Unknown | Unknown |
| Suntrust Bank 303 Peachtree St. Ne Atlanta, GA 30308 | | Various Assets of the Debtor | | \$44,912.02 | Unknown | Unknown |
| Suntrust Bank 303 Peachtree St. Ne Atlanta, GA 30308 | | Credit Card | | | | \$25,564.22 |
| Tadlock Roofing, Inc. 502 Capital Circle SE Unit C-1 Tallahassee, FL 32301 | | Vendor | | | | \$1,150.00 |
| Virtue, Inc. 9823 Tapestry Park Cir. Ste. 101 Jacksonville, FL 32246 | | Various Assets of the Business | Disputed | \$9,596.66 | Unknown | Unknown |
| Wex, Inc. 97 Darling Avenue South Portland, ME 04106 | | Fuel Credit Account | | | | \$14,303.68 |

Fill in this information to identify the case:Debtor name **Gutter Cap of Florida, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **101,426.29****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **101,426.29****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **354,362.89****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **48,547.86****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **620,906.03****4. Total liabilities**
Lines 2 + 3a + 3b\$ **1,023,816.78**

Fill in this information to identify the case:Debtor name Gutter Cap of Florida, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Regions BankChecking Account\$41,055.483.2. Suntrust BankChecking Account\$0.003.3. Wells Fargo BankChecking Account\$644.813.4. Wells Fargo BankSavings Account\$0.00**4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$41,700.29**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Debtor Gutter Cap of Florida, Inc.
Name

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Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.
- ☒ Yes Fill in the information below.

11. Accounts receivable

11a. 90 days old or less: 34,167.00 - 14,167.00 = \$20,000.00
face amount doubtful or uncollectible accounts

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$20,000.00**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
- ☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
- ☒ Yes Fill in the information below.

| | General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-----|--|-------------------------------------|---|---|------------------------------------|
| 19. | <u>Raw materials</u> <u>Various Inventory</u> | <u>December 2017</u> | <u>\$4,826.00</u> | <u>Replacement</u> | <u>\$4,826.00</u> |

20. Work in progress**21. Finished goods, including goods held for resale****22. Other inventory or supplies****23. Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$4,826.00**24. Is any of the property listed in Part 5 perishable?**

- ☒ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☒ No
- ☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

Debtor **Gutter Cap of Florida, Inc.**
Name

Case number (If known) _____

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

| | General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-----|--|--|---|------------------------------------|
| 39. | Office furniture Desks, Filing Cabinets, Office Chairs, Compact Refrigerator, Microwave, Various Office Items | Unknown | Liquidation | \$1,500.00 |
| 40. | Office fixtures | | | |
| 41. | Office equipment, including all computer equipment and communication systems equipment and software Computers, Printers, Software, Phone System, and Various Equipment | Unknown | Liquidation | \$1,200.00 |
| 42. | Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles | | | |
| 43. | Total of Part 7. Add lines 39 through 42. Copy the total to line 86. | | | \$2,700.00 |
| 44. | Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |
| 45. | Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | | |

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

| | General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number) | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|-------|---|--|---|------------------------------------|
| 47. | Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles | | | |
| 47.1. | 2012 Nissan NV 2500 Cargo Van VIN: 1N6AF0KY5CN108429 | Unknown | Liquidation | \$7,000.00 |
| 47.2. | 2002 Ford E350 Van VIN: 1FDWE35L72HB14870 | Unknown | Liquidation | \$700.00 |

Debtor Gutter Cap of Florida, Inc.

Name

Case number (If known) _____

47.3. 2012 Nissan NV 2500 Cargo Van VIN:
1N6BF0KY6CN103387UnknownLiquidation\$7,000.0047.4. 2015 Honda CRVUnknownLiquidation\$10,000.0048. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*49. **Aircraft and accessories**50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**Various Ladders, Racks, Scaffolding, Brake, Cutoffs, Folding Tables, Water Displays, Saw Horses, Garbage Cans, Water Hoses, Impact Drills, Sawsalls, Chopsaws, Blowers, Stands, Gutter Machine, Various Tools and EquipmentUnknownLiquidation\$7,500.0051. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$32,200.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**☒ No☐ Yes**Part 9: Real property**54. **Does the debtor own or lease any real property?**☒ No. Go to Part 10.☐ Yes Fill in the information below.**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**☒ No. Go to Part 11.☐ Yes Fill in the information below.**Part 11: All other assets**70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☒ No. Go to Part 12.☐ Yes Fill in the information below.

Debtor **Gutter Cap of Florida, Inc.**
Name

Case number (If known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

| Type of property | Current value of personal property | Current value of real property |
|---|------------------------------------|--------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i> | \$41,700.29 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$0.00 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$20,000.00 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | \$0.00 | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$4,826.00 | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$0.00 | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | \$2,700.00 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$32,200.00 | |
| 88. Real property. <i>Copy line 56, Part 9.....></i> | | \$0.00 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$0.00 | |
| 90. All other assets. <i>Copy line 78, Part 11.</i> | \$0.00 | |
| 91. Total. Add lines 80 through 90 for each column | \$101,426.29 | \$0.00 |
| 92. Total of all property on Schedule A/B. Add lines 91a+91b=92 | | \$101,426.29 |

Fill in this information to identify the case:Debtor name Gutter Cap of Florida, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

| | | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim |
|--|---|---|--|
| 2.1 American Honda Finance | Describe debtor's property that is subject to a lien 2015 Honda CRV | \$11,078.60 | \$10,000.00 |
| Creditor's Name | | | |
| 20800 Madrona Avenue Torrance, CA 90503 | Describe the lien Purchase Money Security | | |
| Creditor's mailing address | Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| Creditor's email address, if known | Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) | | |
| Date debt was incurred | | | |
| Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | | |
| Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. | | | |

| | | | |
|---|---|---------------------|----------------|
| 2.2 Suntrust Bank | Describe debtor's property that is subject to a lien Various Assets of the Debtor | \$288,775.61 | Unknown |
| Creditor's Name | | | |
| 303 Peachtree St. Ne Atlanta, GA 30308 | Describe the lien Statutory Lien | | |
| Creditor's mailing address | Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| Creditor's email address, if known | Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) | | |
| Date debt was incurred 04/2018 | | | |
| Last 4 digits of account number | As of the petition filing date, the claim is: Check all that apply | | |
| Do multiple creditors have an interest in the same property? | | | |

Debtor **Gutter Cap of Florida, Inc.**

Case number (if know)

Name

☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.☐ Contingent☐ Unliquidated☐ Disputed**2.3 Suntrust Bank**

Creditor's Name

**303 Peachtree St. Ne
Atlanta, GA 30308**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**04/2015****Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Various Assets of the Debtor**\$44,912.02****Unknown**

Describe the lien

Statutory Lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed**2.4 Virtue, Inc.**

Creditor's Name

**9823 Tapestry Park Cir.
Ste. 101
Jacksonville, FL 32246**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred**Last 4 digits of account number****Do multiple creditors have an interest in the same property?**☒ No☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

Various Assets of the Business**\$9,596.66****Unknown**

Describe the lien

Statutory Lien

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

☐ No☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$354,362.89**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Debtor **Gutter Cap of Florida, Inc.**

Case number (if know) _____

Name

Name and address

On which line in Part 1 did
you enter the related creditor?Last 4 digits of
account number for
this entity**Robert L. Case**
220 North Rosalind Avenue
Orlando, FL 32801Line **2.2****Suntrust Bank**
211 Perimeter Center Parkway
Suite 100
Atlanta, GA 30346Line **2.2**

Fill in this information to identify the case:Debtor name **Gutter Cap of Florida, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

| | | | Total claim | Priority amount |
|-----|---|--|---------------|-----------------|
| 2.1 | Priority creditor's name and mailing address Duval County Tax Collector 231 East Forsyth Street Jacksonville, FL 32202 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$0.00 | \$0.00 |
| | Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| 2.2 | Priority creditor's name and mailing address Florida Dept. of Revenue 5050 West Tennessee Street Tallahassee, FL 32399 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$0.00 | \$0.00 |
| | Date or dates debt was incurred Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | Basis for the claim: Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |

| | | | |
|--------|--|------------------------|--|
| Debtor | Gutter Cap of Florida, Inc. Name | Case number (if known) | |
|--------|--|------------------------|--|

| | | | | |
|---|--|--|--------------------|--------------------|
| 2.3 | Priority creditor's name and mailing address Internal Revenue Service 400 West Bay Street Jacksonville, FL 32202 | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$48,547.86 | \$48,547.86 |
| | | Basis for the claim: Payroll Tax Liabilities | | |
| Date or dates debt was incurred | | Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | | |
| Last 4 digits of account number | | | | |
| Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | | | | |

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

| | | | Amount of claim |
|-----|---|--|---------------------|
| 3.1 | Nonpriority creditor's name and mailing address ADP 7380 Red Road Ste. 202 Miami, FL 33143 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Payroll Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,206.52 |
| 3.2 | Nonpriority creditor's name and mailing address American Express 6985 Union Park Center Midvale, UT 84047 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$28,975.63 |
| 3.3 | Nonpriority creditor's name and mailing address Chase Bank USA 201 North Walnut Street Wilmington, DE 19801 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$14,475.70 |
| 3.4 | Nonpriority creditor's name and mailing address FLA Holdings & Ventures, LLC 3810 Williamsburg Park Blvd. Ste. 4 Jacksonville, FL 32257 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Various Loans</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$202,425.00 |
| 3.5 | Nonpriority creditor's name and mailing address Jonathan Crews 148 Via Tisdelle Orange Park, FL 32073 Date(s) debt was incurred ____ Last 4 digits of account number ____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Owed Payroll and Various Loans</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$103,513.26 |

| | | |
|--------|--|------------------------------|
| Debtor | Gutter Cap of Florida, Inc. Name | Case number (if known) _____ |
|--------|--|------------------------------|

| | | |
|-----|---|---|
| 3.6 | Nonpriority creditor's name and mailing address Lansing Building Products P.O. Box 6649 Richmond, VA 23230 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$28,361.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|-----|---|---|

| | | |
|-----|--|---|
| 3.7 | Nonpriority creditor's name and mailing address Money Pages of Florida, Inc. 7892 Baymeadows Way Jacksonville, FL 32256 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,630.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Advertising</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|-----|--|---|

| | | |
|-----|---|---|
| 3.8 | Nonpriority creditor's name and mailing address On Deck Capital, Inc. 1400 Broadway, 25th Floor New York, NY 10018 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$122,145.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Business Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|-----|---|---|

| | | |
|-----|---|---|
| 3.9 | Nonpriority creditor's name and mailing address Protection One 6820 Southpoint Parkway Ste. 3 Jacksonville, FL 32216 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$515.96 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Former Security</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|-----|---|---|

| | | |
|------|---|---|
| 3.10 | Nonpriority creditor's name and mailing address Suntrust Bank 303 Peachtree St. Ne Atlanta, GA 30308 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$25,564.22 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|---|---|

| | | |
|------|--|--|
| 3.11 | Nonpriority creditor's name and mailing address Susquehanna Salt Lake, LLC 136 E. South Temple Ste. 1400 Salt Lake City, UT 84111 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|--|--|

| | | |
|------|---|---|
| 3.12 | Nonpriority creditor's name and mailing address Tadlock Roofing, Inc. 502 Capital Circle SE Unit C-1 Tallahassee, FL 32301 Date(s) debt was incurred _____ Last 4 digits of account number _____ | As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,150.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Vendor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes |
|------|---|---|

Debtor **Gutter Cap of Florida, Inc.**
Name

Case number (if known)

3.13 Nonpriority creditor's name and mailing address**Wex, Inc.**
97 Darling Avenue
South Portland, ME 04106

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Fuel Credit Account**Is the claim subject to offset? ☒ No ☐ Yes**\$14,303.68****3.14 Nonpriority creditor's name and mailing address****William Barton Crews**
3810 Williamsburg Park Blvd.
Ste. 9
Jacksonville, FL 32257

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
-
- ☐
- Unliquidated
-
- ☐
- Disputed

Basis for the claim: **Owed Payroll and Various Loans**Is the claim subject to offset? ☒ No ☐ Yes**\$67,640.00****Part 3: List Others to Be Notified About Unsecured Claims****4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2.** Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

| | Name and mailing address | On which line in Part 1 or Part 2 is the related creditor (if any) listed? | Last 4 digits of account number, if any |
|-----|--|--|---|
| 4.1 | Alan Gest 20801 Biscayne Blvd. Ste. 506 Miami, FL 33180 | Line 3.6 <input type="checkbox"/> Not listed. Explain _____ | — |
| 4.2 | Corporation Service Company P.O. Box 2576 Springfield, IL 62708 | Line 3.8 <input type="checkbox"/> Not listed. Explain _____ | — |
| 4.3 | JPMorgan Chase 270 Park Ave. New York, NY 10017 | Line 3.3 <input type="checkbox"/> Not listed. Explain _____ | — |
| 4.4 | Michael Kolcun 13720 Old St. Augustine Rd. Ste. 8, Box 270 Jacksonville, FL 32258 | Line 3.7 <input type="checkbox"/> Not listed. Explain _____ | — |

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**5. Add the amounts of priority and nonpriority unsecured claims.****5a. Total claims from Part 1****5b. Total claims from Part 2****5c. Total of Parts 1 and 2**

Lines 5a + 5b = 5c.

| Total of claim amounts | |
|------------------------|----------------------|
| 5a. | \$ 48,547.86 |
| 5b. + | \$ 620,906.03 |
| 5c. | \$ 669,453.89 |

Fill in this information to identify the case:Debtor name **Gutter Cap of Florida, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**2.1. State what the contract or lease is for and the nature of the debtor's interest **Lease on location.**

State the term remaining

List the contract number of any government contract _____

**11251 Business Park LLC
1400 Prudential Drive
Ste. 7
Jacksonville, FL 32207**2.2. State what the contract or lease is for and the nature of the debtor's interest **Lease on 2015 Ford E350.**

State the term remaining

List the contract number of any government contract _____

**Royal Contractors North Fl.
P.O. Box 56315
Jacksonville, FL 32241**

Fill in this information to identify the case:Debtor name **Gutter Cap of Florida, Inc.**United States Bankruptcy Court for the: **MIDDLE DISTRICT OF FLORIDA**

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206H
Schedule H: Your Codebtors****12/15****Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.****1. Do you have any codebtors?**☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.☒ Yes**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.***Column 1: Codebtor**Column 2: Creditor***Name****Mailing Address****Name***Check all schedules that apply:***2.1 Jonathan Crews****148 Via Tisdelle
Orange Park, FL 32073****Suntrust Bank**☒ D **2.2**
☐ E/F _____
☐ G _____**2.2 Jonathan Crews****148 Via Tisdelle
Orange Park, FL 32073****Suntrust Bank**☒ D **2.3**
☐ E/F _____
☐ G _____**2.3 Jonathan Crews****148 Via Tisdelle
Orange Park, FL 32073****Suntrust Bank**☐ D _____
☒ E/F **3.10**
☐ G _____**2.4 Jonathan Crews****148 Via Tisdelle
Orange Park, FL 32073****Lansing Building
Products**☐ D _____
☒ E/F **3.6**
☐ G _____**2.5 Jonathan Crews****148 Via Tisdelle
Orange Park, FL 32073****Money Pages of
Florida, Inc.**☐ D _____
☒ E/F **3.7**
☐ G _____

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

| | | | | |
|-----|-----------------------|---|------------------------------|--|
| 2.6 | Jonathan Crews | 148 Via Tisdelle Orange Park, FL 32073 | On Deck Capital, Inc. | <input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____ |
|-----|-----------------------|---|------------------------------|--|

| | | | | |
|-----|-----------------------|---|-----------------------------------|--|
| 2.7 | Jonathan Crews | 148 Via Tisdelle Orange Park, FL 32073 | American Honda Finance | <input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____ |
|-----|-----------------------|---|-----------------------------------|--|

| | | | | |
|-----|-----------------------|---|---------------------|--|
| 2.8 | Jonathan Crews | 148 Via Tisdelle Orange Park, FL 32073 | Virtue, Inc. | <input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____ |
|-----|-----------------------|---|---------------------|--|

| | | | | |
|-----|---------------------------------|---|----------------------|--|
| 2.9 | William Barton Crews | 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | Suntrust Bank | <input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____ |
|-----|---------------------------------|---|----------------------|--|

| | | | | |
|------|---------------------------------|---|----------------------|--|
| 2.10 | William Barton Crews | 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | Suntrust Bank | <input checked="" type="checkbox"/> D <u>2.3</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____ |
|------|---------------------------------|---|----------------------|--|

| | | | | |
|------|---------------------------------|---|-------------------------|--|
| 2.11 | William Barton Crews | 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | American Express | <input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____ |
|------|---------------------------------|---|-------------------------|--|

| | | | | |
|------|---------------------------------|---|--------------------------------------|--|
| 2.12 | William Barton Crews | 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | Lansing Building Products | <input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____ |
|------|---------------------------------|---|--------------------------------------|--|

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known) _____

Additional Page to List More Codebtors**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor

Column 2: Creditor

| | | | | |
|------|---------------------------------|---|------------------------------|--|
| 2.13 | William Barton Crews | 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | On Deck Capital, Inc. | <input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.8 <input type="checkbox"/> G _____ |
|------|---------------------------------|---|------------------------------|--|

| | | | | |
|------|---------------------------------|---|---------------------|--|
| 2.14 | William Barton Crews | 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | Virtue, Inc. | <input checked="" type="checkbox"/> D 2.4 <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____ |
|------|---------------------------------|---|---------------------|--|

Fill in this information to identify the case:Debtor name Gutter Cap of Florida, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF FLORIDA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income**1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From 1/01/2018 to **Filing Date****Sources of revenue**
Check all that apply☒ Operating a business☐ Other _____**Gross revenue**
(before deductions and exclusions)\$596,542.93**For prior year:**From 1/01/2017 to 12/31/2017☒ Operating a business☐ Other _____\$796,513.00**For year before that:**From 1/01/2016 to 12/31/2016☒ Operating a business☐ Other _____\$955,649.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**
Check all that apply

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known) _____

| Creditor's Name and Address | Dates | Total amount of value | Reasons for payment or transfer <i>Check all that apply</i> |
|---|---|-----------------------|---|
| 3.1. Senox 6858 Phillips Parkway Dr. S. Jacksonville, FL 32256 | August - November 2018 | \$37,341.67 | <input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____ |
| 3.2. Truss 37535 Interstate 10 W. Boerne, TX 78006 | August - November 2018 | \$10,029.67 | <input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____ |
| 3.3. Gutter Cap 480 Industrial Drive Ste. 108 Naperville, IL 60563 | August - November 2018 | \$13,207.12 | <input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ____ |

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

| Insider's name and address Relationship to debtor | Dates | Total amount of value | Reasons for payment or transfer |
|--|-------|-----------------------|---------------------------------|
|--|-------|-----------------------|---------------------------------|

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

| Creditor's name and address | Describe of the Property | Date | Value of property |
|---|--------------------------|------------------|--------------------|
| Ally Financial 500 Woodward Ave. Detroit, MI 48226 | 2015 Ford E350 | June 2018 | \$19,000.00 |

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

| Creditor's name and address | Description of the action creditor took | Date action was taken | Amount |
|-----------------------------|---|-----------------------|--------|
|-----------------------------|---|-----------------------|--------|

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known)

☐ None.

| | Case title Case number | Nature of case | Court or agency's name and address | Status of case |
|------|---|-----------------|--|---|
| 7.1. | Lansing Building Products, Inc. v. Gutter Cap of Florida, Inc., et. al. 2018-CA-006829 | Contract | Duval County Circuit Court West Adams Street Jacksonville, FL 32202 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| 7.2. | Suntrust Bank v. Gutter Cap of Florida, Inc., et. al. 2018-CA-004456 | Contract | Duval County Circuit Court West Adams Street Jacksonville, FL 32202 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| 7.3. | On Deck Capital, Inc. v. Gutter Cap of Florida Inc., et. al. CL-2018-0012548 | Contract | Fairfax Circuit Court 4110 Chain Bridge Road Ste. 321 Fairfax, VA 22030 | <input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded |
| 7.4. | Money Pages of Florida, Inc. v. Gutter Cap of Florida, Inc. 2018-CC-005530 | Contract | Duval County Circuit Court West Adams Street Jacksonville, FL 32202 | <input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded |

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

| Recipient's name and address | Description of the gifts or contributions | Dates given | Value |
|------------------------------|---|-------------|-------|
|------------------------------|---|-------------|-------|

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

| Description of the property lost and how the loss occurred | Amount of payments received for the loss | Dates of loss | Value of property lost |
|--|--|---------------|------------------------|
| | <p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</p> | | |

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known)

| | Who was paid or who received the transfer? Address | If not money, describe any property transferred | Dates | Total amount or value |
|-------|--|---|-------------------------|-----------------------|
| 11.1. | The Law Offices of Jason A. Burgess, LLC 1855 Mayport Road Atlantic Beach, FL 32233 | | November 6, 2018 | \$9,217.00 |
| | Email or website address | | | |
| | Who made the payment, if not debtor? | | | |

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None.

| Name of trust or device | Describe any property transferred | Dates transfers were made | Total amount or value |
|-------------------------|-----------------------------------|---------------------------|-----------------------|
|-------------------------|-----------------------------------|---------------------------|-----------------------|

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

| Who received transfer? Address | Description of property transferred or payments received or debts paid in exchange | Date transfer was made | Total amount or value |
|-----------------------------------|--|------------------------|-----------------------|
|-----------------------------------|--|------------------------|-----------------------|

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

| Address | Dates of occupancy From-To |
|---------|-------------------------------|
|---------|-------------------------------|

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

| Facility name and address | Nature of the business operation, including type of services the debtor provides | If debtor provides meals and housing, number of patients in debtor's care |
|---------------------------|--|---|
|---------------------------|--|---|

Part 9: Personally Identifiable Information

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known)

16. Does the debtor collect and retain personally identifiable information of customers?

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?
Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

| Financial Institution name and Address | Last 4 digits of account number | Type of account or instrument | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
|--|---------------------------------|-------------------------------|--|---|
|--|---------------------------------|-------------------------------|--|---|

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

| Depository institution name and address | Names of anyone with access to it Address | Description of the contents | Do you still have it? |
|---|--|-----------------------------|-----------------------|
|---|--|-----------------------------|-----------------------|

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

| Facility name and address | Names of anyone with access to it | Description of the contents | Do you still have it? |
|---------------------------|-----------------------------------|-----------------------------|-----------------------|
|---------------------------|-----------------------------------|-----------------------------|-----------------------|

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☐ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known) _____

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

| Case title Case number | Court or agency name and address | Nature of the case | Status of case |
|---------------------------|-------------------------------------|--------------------|----------------|
|---------------------------|-------------------------------------|--------------------|----------------|

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|---------------------------------------|-----------------------------|----------------|
|-----------------------|---------------------------------------|-----------------------------|----------------|

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

| Site name and address | Governmental unit name and address | Environmental law, if known | Date of notice |
|-----------------------|---------------------------------------|-----------------------------|----------------|
|-----------------------|---------------------------------------|-----------------------------|----------------|

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

| Business name address | Describe the nature of the business | Employer Identification number Do not include Social Security number or ITIN. | Dates business existed |
|-----------------------|-------------------------------------|--|------------------------|
|-----------------------|-------------------------------------|--|------------------------|

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

| Name and address | Date of service From-To |
|---|----------------------------|
| 26a.1. William Barton Crews 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | 2015 - Current |

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

| Name and address | If any books of account and records are unavailable, explain why |
|------------------|---|
|------------------|---|

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known)

Name and address**If any books of account and records are unavailable, explain why**

26c.1. **William Barton Crews**
3810 Williamsburg Park Blvd.
Ste. 9
Jacksonville, FL 32257

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None

Name and address**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

27.1 **Chad Woodson**

December 2017

\$30,371 (Replacement)

Name and address of the person who has possession of inventory records

William Barton Crews
3810 Williamsburg Park Blvd.
Ste. 9
Jacksonville, FL 32257

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

| Name | Address | Position and nature of any interest | % of interest, if any |
|------------------------------|--|-------------------------------------|-----------------------|
| Jonathan Crews | 148 Via Tisdelle Orange Park, FL 32073 | Vice President | 0% |
| Name | Address | Position and nature of any interest | % of interest, if any |
| William Barton Crews | 3810 Williamsburg Park Blvd. Ste. 9 Jacksonville, FL 32257 | President | 0% |
| Name | Address | Position and nature of any interest | % of interest, if any |
| FLA Holdings & Ventures, LLC | 3810 Williamsburg Park Blvd. Ste. 4 Jacksonville, FL 32257 | Shareholder | 100% |

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

page 7

Debtor **Gutter Cap of Florida, Inc.**

Case number (if known) _____

- ☐ No
- ☒ Yes. Identify below.

| Name and address of recipient | Amount of money or description and value of property | Dates | Reason for providing the value |
|---|--|--|--------------------------------|
| 30.1 Jonathan Crews 148 Via Tisdelle Orange Park, FL 32073 | \$5,384.62 | November 17, 2017 - \$1,384.62; September 2018 - \$2,000.00; October 2018 - \$2,000.00 | Salary |
| Relationship to debtor Vice President | | | |

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
- ☐ Yes. Identify below.

| Name of the parent corporation | Employer Identification number of the parent corporation |
|--------------------------------|--|
|--------------------------------|--|

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
- ☐ Yes. Identify below.

| Name of the pension fund | Employer Identification number of the parent corporation |
|--------------------------|--|
|--------------------------|--|

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **November 7, 2018**

/s/ William Barton Crews

Signature of individual signing on behalf of the debtor

William Barton Crews

Printed name

Position or relationship to debtor **President**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
- ☐ Yes

**United States Bankruptcy Court
Middle District of Florida**

In re **Gutter Cap of Florida, Inc.**

Debtor(s)

Case No.

Chapter

11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

| Name and last known address or place of business of holder | Security Class | Number of Securities | Kind of Interest |
|--|----------------|----------------------|------------------|
| FLA Holdings & Ventures, LLC 3810 Williamsburg Park Blvd. Ste. 4 Jacksonville, FL 32257 | | 100% | |

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **President** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **November 7, 2018**Signature **/s/ William Barton Crews**
William Barton Crews

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
Middle District of Florida**

In re **Gutter Cap of Florida, Inc.**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **November 7, 2018**

/s/ William Barton Crews

William Barton Crews/President

Signer/Title

Gutter Cap of Florida, Inc.
3810 Williamsburg Park Blvd., Ste. 4
Jacksonville, FL 32257

Duval County Tax Collector
231 East Forsyth Street
Jacksonville, FL 32202

On Deck Capital, Inc.
1400 Broadway, 25th Floor
New York, NY 10018

Jason A. Burgess
The Law Offices of Jason A. Burgess, LLC
1855 Mayport Road
Atlantic Beach, FL 32233

FLA Holdings & Ventures, LLC
3810 Williamsburg Park Blvd.
Ste. 4
Jacksonville, FL 32257

Protection One
6820 Southpoint Parkway
Ste. 3
Jacksonville, FL 32216

11251 Business Park LLC
1400 Prudential Drive
Ste. 7
Jacksonville, FL 32207

Florida Dept. of Revenue
5050 West Tennessee Street
Tallahassee, FL 32399

Robert L. Case
220 North Rosalind Avenue
Orlando, FL 32801

ADP
7380 Red Road
Ste. 202
Miami, FL 33143

Internal Revenue Service
400 West Bay Street
Jacksonville, FL 32202

Royal Contractors North Fl.
P.O. Box 56315
Jacksonville, FL 32241

Alan Gest
20801 Biscayne Blvd.
Ste. 506
Miami, FL 33180

Jonathan Crews
148 Via Tisdelle
Orange Park, FL 32073

Suntrust Bank
303 Peachtree St. Ne
Atlanta, GA 30308

American Express
6985 Union Park Center
Midvale, UT 84047

JPMorgan Chase
270 Park Ave.
New York, NY 10017

Suntrust Bank
211 Perimeter Center Parkway
Suite 100
Atlanta, GA 30346

American Honda Finance
20800 Madrona Avenue
Torrance, CA 90503

Lansing Building Products
P.O. Box 6649
Richmond, VA 23230

Susquehanna Salt Lake, LLC
136 E. South Temple
Ste. 1400
Salt Lake City, UT 84111

Chase Bank USA
201 North Walnut Street
Wilmington, DE 19801

Michael Kolcun
13720 Old St. Augustine Rd.
Ste. 8, Box 270
Jacksonville, FL 32258

Tadlock Roofing, Inc.
502 Capital Circle SE
Unit C-1
Tallahassee, FL 32301

Corporation Service Company
P.O. Box 2576
Springfield, IL 62708

Money Pages of Florida, Inc.
7892 Baymeadows Way
Jacksonville, FL 32256

Virtue, Inc.
9823 Tapestry Park Cir.
Ste. 101
Jacksonville, FL 32246

Wex, Inc.
97 Darling Avenue
South Portland, ME 04106

William Barton Crews
3810 Williamsburg Park Blvd.
Ste. 9
Jacksonville, FL 32257

**United States Bankruptcy Court
Middle District of Florida**

In re **Gutter Cap of Florida, Inc.**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Gutter Cap of Florida, Inc.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

**FLA Holdings & Ventures, LLC
3810 Williamsburg Park Blvd.
Ste. 4
Jacksonville, FL 32257**

☐ None [*Check if applicable*]

November 7, 2018

Date

/s/ Jason A. Burgess

Jason A. Burgess 40757

Signature of Attorney or Litigant

Counsel for **Gutter Cap of Florida, Inc.**

The Law Offices of Jason A. Burgess, LLC

1855 Mayport Road

Atlantic Beach, FL 32233

(904) 372-4791 Fax:(904) 853-6932

jason@jasonaburgess.com